| "PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003  1066053   |   |   |              |                               |                     |                  |          |                     |                        |    |                      |                        |  |
|---|---|---|--------------|-------------------------------|---------------------|------------------|----------|---------------------|------------------------|----|----------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                    |   |   |              |                               |                     |                  |          | SMALL EN            | ,                      | OR | OTHER<br>SMALL       | THAN                   |  |
| TOTAL CLAIMS  |   |   | 12           |                               |                     |                  | 1        | RATE                | FEE                    | 1  | RATE                 | FEE                    |  |
| FOR   |   |   | NUMBER FILED |                               | NUMBER EXTRA        |                  |          | Basic Fee           | 375.00                 | OR | BASIC FEE            | 750.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 12 min       | us 20⇒                        | •                   |                  |          | X\$ 9=              |                        | OR | X\$18=               |                        |  |
| INDEPENDENT CLAIMS  |   |   | / minus 3 =  |                               |                     |                  |          | X42=                |                        | OR | X84=                 |                        |  |
| MU  | LTIPLE DEPEN  | DENT CLAIM PI                             | RESENT       |                               |                     |                  |          | +140=               |                        | OR | +280=                |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2          |   |   |              |                               |                     | olumn 2          |          | TOTAL               | 27                     | OR | TOTAL                |                        |  |
| 2,  | 31-04 C   |   |              | لهبت                          | •                   | OTHER            |          |                     |                        |    |                      |                        |  |
| 2   |   | (Column 1)                                | SMALL        |                               | OR                  | SMALL            |          |                     |                        |    |                      |                        |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT           |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER                 | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                 | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | · 10                                      | Minus        | - <i>d</i>                    | 0                   | -                |          | X\$ 9=              |                        | OR | X\$18=               |                        |  |
|   | independent   | • /                                       | Minus        | Z                             |                     | <u>-/</u>        |          | X42=                |                        | OR | X84≈                 |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                    |   |   |              |                               |                     |                  |          | +140=               | 7                      | OR | +280=                |                        |  |
|   | · .   |   |              |                               |                     |                  | ١        | TOTAL               |                        | OR | TOTAL<br>ADDIT, FEE  |                        |  |
| 9   | 14106   | (Column 1)                                |              | (Colu                         | mn 2)               | (Column 3)       |          | ADDIT. FEE          |                        | 8  | <b>- 100</b> 11, FEE |                        |  |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIĞI<br>NUM<br>PREVI<br>PAID  | EST<br>BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | PATE                 | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | · 10                                      | Minus        | * 0                           | 20                  | • /              |          | X\$ 9=              |                        | OR | X\$18=               |                        |  |
|   | Independent   | •   | Minus        | ***                           | 3_                  | <u> - /</u>      | 4        | X42=                |                        | OR | X84=                 |                        |  |
| L   | FINST PHESE   | NTATION OF MI                             | ULTIPUE DEF  | PENDEN                        | CLAIM               |                  | J        | +140=               |                        | OR | +280 <del>≐</del>    |                        |  |
|   |   |   |              |                               | •                   | •                |          | TOTAL<br>ADDIT. FEE | Ц                      | OR | ADDIT. FEE           |                        |  |
|   |   | (Column 1)                                | -            | (Colu                         |                     | (Column 3        | <b>L</b> |                     |                        | _  |                      |                        |  |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVI<br>PAID  | BER                 | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                 | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | ٠   | Minus        | ***                           |                     | •                |          | X\$ 9=              | ·                      | OR | X\$18=               |                        |  |
|   | Independent   | •   | Minus        | 494                           |                     |                  | ]        | X42=                |                        | OR | X84=                 |                        |  |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                               |                     |                  |          | +140=               |                        | OR | +280=                |                        |  |
| If the entry in column 1 is less than the entry in column 2, write V in column 3. |   |   |              |                               |                     |                  |          |                     |                        |    |                      |                        |  |
|   | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |              |                               |                     |                  |          |                     |                        |    |                      |                        |  |

Application or Docket Number